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State of Wisconsin Department of Corrections

February 15, 2017

Sheriff Mike Lukas
Portage County Sheriff's Department
1500 Strong's Avenue
Stevens Point WI 54481

Re: Annual Jail Inspection

Dear Sheriff Lucas:

On February 8, 2017, the annual inspection of the Portage County Jail was conducted pursuant to WI Statute 301.37(3). The inspection compared the facility and its operation to applicable state statutes and Department of Corrections' Administrative Code Chapter DOC 350. This report summarizes my findings, including the progress made following the 2016 inspection, any statute or administrative code violations, physical plant and maintenance issues, and an overall summary of facility operations. The inspection worksheet document is attached to this report and includes detailed inspection results.

On the day of the inspection, there were 60 inmates incarcerated in the facility, 19 inmates supervised with the use of the Home Detention Program, 40 inmates incarcerated in other jurisdictions, and 6 inmates in other jurisdictions for various reasons (WRIT, hospitalized, etc.). On the day of the inspection, the total inmate population under the authority and responsibility of the sheriff's department was 125 inmates.

Progress following the 2016 Inspection

Operational changes include:

The Portage County Jail Policy Manual revision and approval by DOC-ODF on October 1, 2014, remains a live document with annual review and updates completed.

DNA collection procedures began in April 2015. The collection of DNA has increased significantly.

The strip search procedures have been updated following a change in the law.

Classification software has been purchased and installed. Classification procedures will be completed via the program and paper procedures will be discontinued.

Video visitation equipment has been purchased and is stored throughout the facility; waiting on the remainder of the equipment to arrive. Equipment installment and implementation is scheduled in the near future; cable is installed. Kiosk installation in each housing unit and two public visiting booths is forthcoming. Visitors can also visit via an internet connect from an off-site location.

Two of the visiting booths are scheduled to be designated as professional visiting booths. Paper-pass equipment is scheduled to be installed.

[REDACTED]

The jurisdiction has completed an agreement/contract with Waupaca County to secure 35 rental beds for the housing of inmates due to the lack of available facility beds. It is noted that on the day of the inspection, 40 inmates were housed in other jurisdictions.

Initiatives include:

Complete the video visitation and paper-pass installation and implement program.

Request for Proposals (RFP) for medical health care services is posted with bids due the end of February 2017.

Jail needs including plumbing and heating/cooling remodel continue to be evaluated; resolutions identified and movement addressing issues require completion.

Recruiting processes are being evaluated for possible revisions; employment interest and qualified candidates has decreased significantly in the past years. Recruiting outside the agency is being evaluated (colleges, job fairs, etc.).

Equipment scheduled for replacement in the kitchen includes the stove and ovens.

Deficiencies/Compliance Plans

A few minor items in the kitchen were addressed during the inspection or the following day; they include a formal menu review document provided, monthly internal kitchen inspection documentation and sharps counts and log review and correction.

[REDACTED]

Storage within the facility is limited. Items are stored in hallways that are not designed for this purpose. Storage areas are overflowing with needed jail supplies and inmate property. Jail offices are utilized for the storage of jail items/supplies as well.

Inmate complaints regarding the temperature of the “hot” water require attention. The water temperature is lukewarm at best in many of the housing units. Determine what the temperatures in the housing unit showers and sinks are and address as required.

Maintenance Items

The following items are in need of attention to ensure a healthful condition as outlined in WI Statute 302.37:

- Vents require attention; many are in need of a thorough cleaning.
- The shower walls in housing #H-4 require attention; a thorough cleaning and removal of hard water deposits is recommended.

With the exception of the two items noted above, the facility is well maintained and in an orderly and sanitary condition. The condition of the facility reflects that jail staff is cognizant of facility conditions and address issues as they arise as well as hold inmates accountable for their actions.

Summary of Jail Operations

The Portage County Jail is attached to the Sheriff's Department and is linear designed. A co-located Juvenile Detention Center is adjacent to the jail [REDACTED]

[REDACTED] The facility was constructed in 1991 with some remodeling in 1992 and 1995.

The facility includes a secure control pod, booking area, medical office/exam room, storage areas, one multipurpose room, interview rooms, locker-rooms, staff offices, Huber Intake, laundry area and four inmate visiting booths and a dish-room and kitchen [REDACTED]

Inmate housing units, bed capacity verified on the day of the inspection is as follows: jail maximum section consists of five housing units; Max#1-6 single cells, Max#2-6 single cells, Max#3-6 single cells, Max#4-6 single cells and Max#5-3 single cells and the jail medium/minimum section consists of four dormitories; H/1-13beds, H/2-13 beds, H/3-13 beds and H/4-13 beds. An additional dormitory is used as a "swing cell" depending on needs, jail or juvenile detention, and houses 8 beds. There are four short term holding cells and one holding room.

[REDACTED]

As noted during the previous inspection completed in 2016, the inmate population continues to be managed as aggressively as possible, maintaining the inmate in-house population at a manageable level; approximately 85-90% of the approved capacity. Additionally, the HD Program continues to place eligible inmates and provide program supervision. Holding inmates in other jurisdictions continues due to the lack of facility beds.

Security procedures in place include numerous inspections completed and documented as required. The process in place for the administrative review of jail records and documents is exemplary and applauded. Jail procedures include effective oversight and management supervision procedures. Inmate security observation checks are completed [REDACTED] at irregular intervals. Special watch observation checks are completed [REDACTED] minutes or less. Supervisory reviews of observation logs are detailed and deficiencies are minimal to none existent. This speaks volumes regarding your dedicated staff's response to duties and the facility supervision procedure effectiveness.

Physical plant concerns: The age and antiquated equipment it is difficult to repair due to lack of parts available and parts that are no longer made. This includes the toilets throughout the facility. A lack of floor drains in the booking area, [REDACTED] the heating and cooling system and the hot water delivery system require attention.

The medical office exam, property storage and laundry area space is used as efficiently as possible with the limited space available. The facility areas are utilized to their maximum potential. Storage has expanded to include various office areas and for a number of years items have been stored in the jail hallways. At some point, better storage solutions will need to be identified (supplies, records, inmate property, etc.).

The lack of inmate housing units for the current inmate population impacts on the housing of inmates per classification guidelines. See the attached inspection worksheet document.

The social worker on staff, Ken Wolfe, provides mental health counseling services and a number of inmate programs. The jurisdiction's forward thinking regarding inmate mental health needs and providing a number of inmate services in-house greatly impacts on the climate of the facility and the education of inmates providing various life skill tools and connections to services when released.

Discussions with inmates included a number of significant positive comments reflective of jail operations.

The kitchen area was found in excellent condition; clean, organized and sanitary. The kitchen manager, Johanna Tompkins, assisted with the kitchen inspection and provided documents requested. A few areas identified were corrected by the following day of the inspection. She is commended for her immediate response to the inspection findings and her receptiveness to suggestions and operational recommendations.

The inmate medical service is provided by Advanced Correctional Healthcare. The jail nurse is on site five days a week. Files and documents are detailed and organized and maintained in a confidential manner. Designated security staff, Medical Assurance Officers, assist with various tasks that include medication delivery, records review and follow-up and detailed communication. Medical and security staff collaborates routinely; enhancing the facility operation and medical program.

Jail administration continues to supervise and manage the facility evaluating and enhancing safety and security operations, meeting code requirements and implementing or revising jail procedures that meet sound correctional practices. Staff levels and duties are annually evaluated.

Department Expectations following the 2017 Inspection include:

Address maintenance issues noted above.

Ensure staff training is provided prior to your jurisdiction's training calendar year end. Suicide prevention and health care areas were provided in September 2015 per the training documents provided on the day of the inspection. As requested in the past, ensure documentation of training includes specific subject matter and/or the training agenda.

Including the inmate picture in the medical file and cover sheet for the Medication Administration Record is recommended is evaluated for implementation. The procedure provides an additional identification means or tool for medical personnel and jail staff.

Approval

The Portage County Jail is approved by the Department of Corrections for the secure detention of adult offenders with the maximum capacity of 79 inmates or 87 inmates during timeframes the “swing cell” dormitory for adults or juveniles is utilized for jail adult inmates. This approval is contingent on the continued compliance with all applicable state statutes and administrative codes.

If you have any questions regarding the inspection results summarized in this letter and found in the inspection worksheet document attached or if I may be of any assistance regarding correctional matters, please contact me.

I wish to thank you and your staff for the assistance, courtesy and cooperation provided during the inspection and additional professional contacts throughout the previous year. It has been a pleasure working with you and your staff.

Sincerely,

A handwritten signature in dark ink that reads "Denise Ellis". The signature is written in a cursive, flowing style.

Denise Ellis
Detention Facilities Specialist

cc: Captain Cory Nelson, Jail Administrator
Phil Idsvoog, County Board Chair
Dan Dobratz, Public Safety Emergency Management Committee Chair
Patricia Dreier, County Executive
Kristi Dietz, Director-ODF
File

Enclosure – Inspection Worksheet Document

INMATE HOUSING AND CLASSIFICATION

DOC 350.05 (3) (d) In jails that are constructed or substantially remodeled on or after September 1, 2014, double cells shall have a floor area of at least 25 square feet of unencumbered space per occupant.

Compliance:

- ☐ Meets standard
☐ Needs improvement
☐ Non-compliant
☒ Not reviewed

Verification:

- ☐ Policy and procedure manual review
☐ Sample of facility records reviewed
☐ Sight confirmation by inspector
☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

NA

DOC 350.06 (3) (d), DOC 350.07 (4) In jails that are constructed or substantially remodeled prior to September 1, 2014, to be used for double occupancy, a cell shall have a floor area of at least 70 square feet.

Compliance:

- ☐ Meets standard
☐ Needs improvement
☐ Non-compliant
☒ Not reviewed

Verification:

- ☐ Policy and procedure manual review
☐ Sample of facility records reviewed
☐ Sight confirmation by inspector
☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

NA

DOC 350.20 Double ceiling. If approved by the department, the jail shall have policies and procedures relating to double ceiling.

DOC 350.20 (1) The county board and sheriff shall determine jointly the adequate staffing needs, including support staff and services that are required to ensure the health, safety and security of the jail staff and inmates when using cells for double occupancy. The joint determinations shall be in writing and signed by the representatives of the county board and the sheriff and shall be filed with the department. The written joint determination shall remain in effect until rescinded or amended by mutual written agreement of the county board and sheriff. Unless there is adequate staff as agreed upon by the county board and sheriff, double ceiling may not occur.

A written agreement between the County Board and the Sheriff contains the following elements:

- ◆ That the County Board and Sheriff agree to the stated staffing levels.
- ◆ The staffing levels include security staff, health care staff, support and service staff, and administrative staff.
- ◆ The staffing pattern is detailed in the written agreement.
- ◆ The agreement is signed by representatives of the County Board and the Sheriff.
- ◆ The signed written agreement is on file with the Department of Corrections.

Compliance:

- ☐ Meets standard
☐ Needs improvement
☐ Non-compliant
☒ Not reviewed

Verification:

- ☐ Policy and procedure manual review
☐ Sample of facility records reviewed
☒ Sight confirmation by inspector
☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

NA The facility does not double-cell inmates.

DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats.

Compliance:

- ☒ Meets standard
☒ Needs improvement
☐ Non-compliant
☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
☒ Sample of facility records reviewed
☒ Sight confirmation by inspector
☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

Facility policy #516.3. The Northpointe Classification tool is utilized to determine inmate classification. Classification is initially completed by security staff during the booking process. Classification reviews are completed by an assigned jail corporal who also completes re-classifications as required. Females are typically housed in one housing unit regardless of classification due to the lack of available space/housing units. There were three female inmates housed in a maximum cellblock and a number of female inmates housed in a dormitory. The female dormitory housing unit included a number of classifications and working Hubers. Limited housing options continue to impact on the mixture of classifications housed together, most significantly with the female inmate population.

DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Comments:

Verification:

- ☐ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☒ Previous compliance documented
- ☐ Other (Specify)

DOC 350.20 (4) Receiving cells may not be used for double occupancy.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Comments:

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

The facility has four receiving cells and one group holding room. The receiving cells are used for single occupancy only. [REDACTED] The holding room has an additional large viewing window adjacent to the corrections officer's workstation.

DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs, and community service projects. The jail shall have policies and procedures relating to classification.

DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures, and prisoner appeal process.

DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs, and community service projects.

DOC 350.21 (3) Review of prisoner classification decisions.

- ◆ The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination.
- ◆ A written policy is provided to all correctional staff detailing classification process.
- ◆ Policy clearly identifies personnel authorized to classify inmate housing assignments.
- ◆ Personnel assigned to complete inmate classification assignment receive formal training.
- ◆ A secondary review process is in place by supervising personnel to review reclassification or appeals.
- ◆ Sufficient housing exists to meet classification guidelines for male and female inmates
- ◆ Inmates housed in the same cell shall have the same security classification and be properly segregated as required under s. 302.36, Stats.

Compliance:

- ☒ Meets standard
- ☒ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Comments:

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Facility policy #516. Classification is completed as required. The challenge continues to be the ability to house according to the classification results. There is not sufficient housing units to meet classification guidelines for female inmates and there is limited housing units available to meet the male inmate classification needs. The facility staff continue to manage this challenge as safely and efficiently as possible.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following: (a) 60 minutes

(b) 15 minutes for inmates housed on suicide watch.

- ◆ All inmates are personally observed during each physical inspection.
- ◆ In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

DOC 350.18 (2) Supplemental observation. A video monitoring system may be used to supplement but not replace personal observations.

DOC 350.18 (3) Documentation. Each observation shall be documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #508.1, #508.3 and #510.9. Inmate supervision observations are documented via the use of an electronic device; the date, time and location of the completed observation is electronically recorded and can not be manipulated. The facility policy requires that checks be completed [REDACTED] DOC 350.18(1)(a) requirement of intervals is not to exceed 60 minutes. I applaud this practice of frequent and irregular observations completed well beyond the requirement. Dates reviewed: 4-29-16, 8-8-16, 11-11-16, 1-4-17, 1-5-17. Reports are reviewed daily by the jail corporal on shift with findings forwarded to jail administration.

DOC 350.18 (4) Inmate counts. Description of the system for physically counting inmates. Formal counts shall be completed and documented at least three times per day, with a minimum of one count per shift.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #502.2. A standing inmate count is completed four times daily; [REDACTED] Formal counts are noted on a comprehensive form indicating the location and actions of each inmate.

DOC 350.18 (5) Security inspections. Descriptions of procedures for conducting and documenting facility and area searches.

- ◆ Facility and area searches are completed and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #528.7. The jail Corporals manage the security inspections to ensure completion [REDACTED] as required. Documentation of security inspection completion is forwarded to the jail administrator.

DOC 350.18 (6) Inmate searches. Descriptions of procedures for conducting and documenting inmate pat down, strip, and body cavity searches.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #528.3, #528.1 through #528.5.

DOC 350.18 (7) Door and lock inspections. Monthly inspections shall be made to determine if all jail doors and locks within and to the secure perimeter of the facility are in good working order. Each inspection shall be documented.

- ◆ The remote security controls of doors and locks are all operable.
- ◆ All malfunctioning doors, locks, and releases are repaired in a timely manner.
- ◆ The jail staff demonstrate a proficiency in operating all locks, doors, and releases.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #222.2.5. Door and lock inspections are assigned to jail staff on a rotating basis and completed as required. The majority of the jail staff complete at least one inspection a year. [REDACTED] maintenance personnel are present during the door and lock inspections should repairs be needed.

- ◆ Portable communications and alarm systems are in good working condition.
- ◆ Intercom and emergency notification devices are in good working order.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☐ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments: **Operational on the day of the inspection.**

DOC 350.18 (8) Key control. Control and use of jail keys, including all of the following:

- (a) All issued keys shall be inventoried and accounted for at shift change.
- (b) All keys shall be stored in a secure area and accessible in the event of an emergency.
- (c) Inmates are not permitted to handle or utilize jail keys.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #222.2.3. A comprehensive key control procedure is in place; the KeyWatcher equipment is utilized for facility key control and the jail key inventory is reviewed daily by the jail corporal on shift.

DOC 350.18 (9) Weapons control. Introduction, availability, control, inventory, storage and use of firearms, chemical agents, electronic control devices, or other related security devices and specification of the level of authority required for their access and use.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #514.2. Signage is posted prior to entrance restricting firearms within the facility. Secure lockers are provided prior to the facility entrance.

DOC 350.18 (10) Tools and sharps control. Introduction, availability, control, inventory, storage and use of tools and sharps within the facility.

- ◆ Documentation of the control and inventory is maintained.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #756.1 and #210.1. Workstations located in the jail hallways are secured when not in use. As a reminder, when securing the equipment drawers double check to ensure the locking mechanism worked properly.

DOC 350.19 Fire safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- (a) Local fire department inspections requirements under sub. (5).
- (b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers, and self-contained breathing apparatuses which operate for at least 30 minutes.
 - ◆ Fire extinguishers are properly maintained, with recorded time-dated inspection.
 - ◆ Fire extinguishers are properly placed, secured, and easily accessible to staff.
 - ◆ A fire extinguisher suitable for grease fires is provided in the kitchen.
 - ◆ Jail staff can demonstrate proficiency in the use of fire protection equipment.
 - ◆ Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.
- (c) Training of staff in equipment use and the evacuation of inmates.
 - ◆ Documentation of staff training.
- (d) A written evacuation plan.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #406.3. A fire inspection was completed on 10-6-16. Fire extinguishers are inspected annually with a date stamp of 10-2016. Captain Cory Nelson demonstrated his proficient ability donning an SCBA. An annual fire alarm inspection and testing was completed on 1-23-17, an annual sprinkler system inspection was completed on 1-26-16 and the kitchen fire suppression system inspection was completed on 10-2016.

DOC 350.19 (3) The evacuation route developed as part of the evacuation plan under sub. (2) (d) shall be posted in a conspicuous place for jail staff in the jail.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #406.3. Evacuation routes are posted throughout the facility.

DOC 350.19 (4) Fire safety evacuation and other procedures shall be practiced or simulated by all jail staff at least once every 12 months. Each practice or simulation shall be documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #406.2 and #406.6. Staff training was provided in March and December 2016.

DOC 350.19 (5) The facility shall be inspected by the local fire department at least once every 12 months and a record thereof shall be maintained.

- ◆ The fire inspection report supports that the facility conforms to applicable fire safety codes.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☐ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #406.7. A fire inspection was completed in 2016.

DOC 350.19 (6) There shall be monthly inspections of the facility to ensure compliance with safety and fire prevention standards. Inspections shall be documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #406.7. Monthly inspections are completed, documented and records maintained as required.

DOC 350.22 Use of force. The jail shall have policies and procedures for the use of force.

DOC 350.22 (1) Jail staff may use physical force against an inmate only if force is necessary to change the location of an inmate or to prevent death or bodily injury to the staff member, the inmate or someone else, unlawful damage to property, or the escape of an inmate from the jail. Staff may use only the amount of force reasonably necessary to achieve the objective for which force is used. Corporal punishment of inmates is forbidden.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #522 and #524.1. Records reviewed found detailed reports, internal forms completed and incident review completed by the jail supervisor with a final review completed by the agency DAT Instructor.

DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jail administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shift unless otherwise authorized by the sheriff or sheriff's designee.

- ◆ Supervisory review is conducted and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☐ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Three use of force reports were reviewed; reports are thorough and include facility forms and supervisory notification as required.

DOC 350.23 Use of restraints. The jail shall have policies and procedures governing the use of restraints and control devices.

DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary.

- ◆ Inventories are conducted and documented.

DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use, and corresponding wellness checks.

- ◆ Supervisory review is conducted and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #522.2. A number of reports were reviewed; required information is documented. All jail reports that include restraints and use of force are reviewed by jail administrative staff.

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmate rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or the jail rules posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges, or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate informed of violation, potential discipline, and disciplinary procedures for minor violations.
- (c) Inmate opportunity to make verbal statement about alleged violation to a staff member.
- (d) Staff member may impose a minor discipline if found violation occurred.
- (e) Supervisor informed of incident by staff member. If supervisor concludes violation is major, then shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified the charge has been dismissed.
- (f) Appeal process in place and notification of process to inmate.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC 350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s.302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance with s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident.
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident).
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing the discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate notified right to appeal and appeal procedure.
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- (e) If inmate waives right to due process hearing, violation disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute admission of alleged violation.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #600. Reports reviewed found no issues; staff routinely complete thorough reports and required forms and follow-up procedures. A supervisory approval and review of disciplinary sanctions is completed.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems, and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

♦ Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- ♦ Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- ♦ Health care professionals provided input into the content of the health screening form.
- ♦ The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse, and suicide risk.
- ♦ A health screening form is completed for each inmate booked into the facility.
- ♦ The health screening forms are reviewed for completeness, accuracy, legibility, and the appropriateness of the decisions made regarding referral, housing, classification, and other actions.
- ♦ The identity of the person who completes the health screening form is documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #722. Health screening forms are competed and reviewed by the jail nurse.

DOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #716.3. Inmate health appraisals are completed within the timeframe required.

DOC 350.14 Inmate health care. There shall be sufficient equipment, material, space, and supplies for the performance of health care services in a confidential manner. The jail shall have policies and procedures for inmate health care, including the following components:

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

The jail health care office limited area and space is utilized in an efficient manner. It is recommend that you evaluate the current and future needs of the medical space. The medical office is located adjacent to the correction officers workstation.

DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody.

- ◆ Jail provides a specific form for inmates to request medical assessment or treatment.
- ◆ All inmate requests for medical care are reviewed by health care staff.
- ◆ The dispositions of the inmate medical requests are documented by health care staff members.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #702.2. Advanced Correctional Healthcare (ACH) provides inmate medical services. The jail nurse, Lisa Dintelman RN, is on site five days a week for a total of approximately 32+ hours. A physician is on site once a week and is available by phone 24/7 as well as a nurse practitioner. Mental health services is provided by a jail social worker five days a week. A Chronic Clinic is provided on a quarterly basis. The jail nurse, physician and social worker also provide service to the juveniles detained at the co-located juvenile detention center.

DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #744.2. Medical personnel licenses are on file and maintained in the facility as required.

DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with ss. 146.81 to 146.83, Stats., and any other applicable state or federal laws.

- ◆ Medical record accessibility is limited to medical staff, the jail administrator, and the administrator's designees as appropriate.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #764.2. Records are maintained as required. Adult records are separate from juvenile records as required.

DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications, and health screening at the time of admission.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☐ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #776.5. Staff training was provided in September 2015. Training for fiscal year 16-17 is being scheduled and will include this training. Jail administration indicated that the 2016 training calendar year ends in June 2017.

DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.

DOC 350.15 (1) Documentation of health referrals made or health care provided.

DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #764.5. Files reviewed are detailed and contain required information.

DOC 350.15 (3) Names, addresses and telephone numbers of health care providers or agencies who have agreed to provide emergency and routine health care services for inmates.

- ◆ Contact information is available to staff.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #702.5. Information is located in the medical office and the protocol book located in the jail control pod accessible to jail staff.

DOC 350.15 (4) Referral of an inmate to jail health care staff or to other agencies that provide health care.

- ◆ Health care referrals are made and documented.
- ◆ Staff are knowledgeable about the health care referral process.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #706.2. Inmate referrals are completed via the jail physician as needed.

DOC 350.15 (5) Designation of staff who have the authority to make health care decisions, including emergency medical and dental care.

DOC 350.15 (6) Non-emergency health care, including the use of an inmate's personal physician.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #702.4 and #702.6.

DOC 350.15 (7) Schedule of inmate access to routine medical care.

- ◆ The schedule of inmate access to medical care is provided to inmates in writing via handbook, posted notice, inmate rule and regulation list, or other appropriate means.
- ◆ An alternative means for inmates to access medical care is provided if the inmates are unable to read or write.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #704.2. The jail nurse is on site five days a week and completes inmate sick call as needed.

DOC 350.15 (8) Provision for inmates with chronic medical conditions.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #728.2. Inmates are provided a Chronic Clinic visit as needed; typically on a quarterly basis.

DOC 350.15 (9) Procedure for processing inmate medical requests on a daily basis.

- ◆ Inmate medical requests are documented on an official medical request form.
- ◆ Written disposition of medical requests are retained in inmate confidential medical files..

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #701.2. The jail nurse receives all requests during the week and weekend requests are reviewed by the jail corporals prior to forwarding to the jail nurse. Staff weekend reviews may result in contact with the jail physician as well. Review documentation completed.

DOC 350.15 (10) Documentation in an inmate's confidential medical file of any referral and identification of the services provided, including emergency services.

- ◆ Health care services provided or refused are documented in the inmate's confidential medical file.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #704.2.

DOC 350.15 (11) Provision of special diet if ordered by a qualified health care professional.

- ◆ Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- ◆ The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.6. A medical diet form is completed by health care staff and forwarded to the jail kitchen.

DOC 350.15 (12) Pregnancy management.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #710. Protocols are followed.

DOC 350.15 (13) Maintenance of agreements between the jail and providers of health care services.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #714. ACH provides the jail inmate health care services.

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

DOC 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
1. The prison's or jail's medical staff.
 2. A prisoner's healthcare provider.
 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

Compliance:

- ☒ Meets standard
☐ Needs improvement
☐ Non-compliant
☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
☒ Sample of facility records reviewed
☐ Sight confirmation by inspector
☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

Facility policy #720. The HTS form completed by jail staff is reviewed by the jail nurse to ensure accuracy and completion of information provided. The acknowledgment of the form received is completed.

DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components:

- (a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats.
- (b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file.
- (c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel.
- (d) Provision for handling bio-hazardous waste and decontaminating medical and dental equipment in accordance with regulations.

Compliance:

- ☒ Meets standard
☐ Needs improvement
☐ Non-compliant
☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
☐ Sample of facility records reviewed
☐ Sight confirmation by inspector
☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

Facility policy #730. Protocols are followed.

DOC 350.15 (16) Detoxification and management of intoxicated inmates.

- ♦ Appropriate housing and supervision is provided.

Compliance:

- ☒ Meets standard
☐ Needs improvement
☐ Non-compliant
☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
☒ Sample of facility records reviewed
☐ Sight confirmation by inspector
☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
☐ Other (Specify)

Comments:

Facility policy #734.2.

DOC 350.16 Control and administration of medications. The jail shall have policies and procedures relating to the control, delivery, and administration of prescription and non-prescription medications.

DOC 350.16 (1) A qualified health care professional shall prescribe medications and order treatments.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy 772.4(c). Medications are prescribed by health care professionals.

DOC 350.16 (2) Designated trained staff may administer or deliver prescribed doses of medication at prescribed times. Annual documented training shall be provided to jail staff that deliver medications.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #772.8. Medications are delivered twice daily with some exceptions. During the week, the jail nurse delivers the am medications and jail staff, typically the assigned medical assurance officers, deliver the pm and weekend medications. Officers assigned this duty, Medical Assurance Officers, receive additional training.

DOC 350.16 (3) Determination by appropriate personnel that all medications brought in by inmates or other persons for an inmate are necessary.

- ♦ Verification of prescription medication is performed by a health care provider or an appropriately trained designee.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #758.3. The majority of the inmate medications is verified by the jail nurse. If the jail nurse is not on site the jail staff verify medications via assistance from the jail physician and document on a medication verification form. The jail nurse reviews the medication verification form as soon as practicable.

DOC 350.16 (4) All medications brought into the jail shall be inventoried and placed in secure storage.

DOC 350.16 (5) Any medications kept at the jail shall be stored in a locked drug cabinet that is not accessible to inmates.

- ♦ The storage of inmate medications makes them readily identifiable.
- ♦ Medications that require refrigeration are kept in a separate, medical refrigerator, unless the medications are secured in a separate, locked container stored in a refrigerator inaccessible to inmates.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #772.3. Medications are stored in a secure location; narcotic medications are double locked and an inventory count is completed daily.

DOC 350.16 (6) Administration or delivery of prescription and nonprescription medications to inmates.

- ♦ Personnel authorized to administer medications are in the current policy and procedure manual and accessible to all jail staff.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #772.5.

DOC 350.16 (7) Medication administered or delivered to an inmate shall be documented, including who prescribed the medication, who administered or delivered the medication, and the date and time of administration or delivery.

DOC 350.16 (8) All refusals of recommended or prescribed medications by an inmate shall be documented. A health care professional shall monitor the inmate in accordance with requirements of s. 302.384, Stats.

- ◆ All medication documentation is complete, accurate, and legible.
- ◆ The name of the pharmacist or qualified health care professional, the full (not abbreviated) name of the medication, the dosage and frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication.
- ◆ The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility.
- ◆ There are no unexplained gaps in the documentation and inmate refusals of medication are clearly indicated and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #772.5(d)(e). The medication administration records (MAR) contain all required information and the jail nurse and the medication assurance officers routinely review the MAR to ensure required documentation is completed. Inmates that refuse their medications are required to sign a refusal form. Adding the inmate picture to the MAR was discussed. The inmate's picture included in the medical file for identification purposes is recommended as well.

DOC 350.16 (9) Return of an inmate's medication inventoried at admission.

DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer.

- ◆ The return of an inmate's medication is documented.
- ◆ Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy.
- ◆ Established protocols regarding the disposal of narcotic medications, including witness presence, are followed.
- ◆ Documentation of the disposition of the medication is retained in the inmate's medical file.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #772.5(g). Inmates typically receive a three day supply of medications when released from the facility. If the inmates medication was not ordered through the jail pharmacy and belongs to the inmate, then the remainder of the medication is released to the inmate. Medication destruction is completed after approximately 30 days and is documented on a medication destruction log.

HIGH RISK SUPERVISION

DOC 350.17 Suicide prevention. The jail shall have policies and procedures relating to the supervision and housing of inmates who may be at risk of seriously injuring themselves.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments: **Facility policy #748.**

DOC 350.17 (1) Obtaining documented information from the arresting or transporting agency to assess an inmate's potential for suicide or self-harm.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #504.3(f). A Notice of Detention form is completed by the arresting/transporting officer. The Notice of Detention form contains questions relating to the inmates behavior and any medical or mental health concerns identified.

DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk.

- ◆ Intake screening is performed on each new inmate.
- ◆ The answers to all screening questions are documented.
- ◆ The screening form is legible, accurate, and complete, including detailed narratives when necessary.
- ◆ Appropriate follow-up questions are asked, and answers recorded, when suicide risk is indicated.
- ◆ Medical or mental health care professionals review intake screening reports when risk is indicated.
- ◆ A secondary security review of intake screening reports for completeness, accuracy, legibility, consistency, appropriateness of housing assignments, appropriateness of classification and risk assessments is conducted.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #722.3.1. Screening forms are completed in a thorough manner and reviewed by the jail nurse.

DOC 350.17 (3) Procedure for placement of an inmate on suicide watch. Policies and procedures relating to the procedure for placing an inmate on suicide watch shall include all of the following components:

- (a) Immediate notification to designated supervisory staff if an inmate is identified as a suicide risk.
- (b) Designation of housing areas and security precautions for inmates who are placed on suicide watch.
- (c) Description of monitoring procedures for inmates on suicide watch, including frequency and documentation of wellness checks.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5. Suicide watch logs reviewed; checks were completed as required. Inmates on a suicide watch are typically housed in the holding room that includes a viewing window in the booking area and a camera that is viewed as additional observations by control pod staff. The jail corporal reviews all logs for accuracy and follows up with a camera review if needed; review findings are documented on the cell check log. Staff do an exemplary job completing this critical task. This review procedure is a sound correctional practice encouraged to continue.

DOC 350.17 (4) Identification of trained persons who may assess an inmate's level of suicide risk.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.4. An inmate may be placed on a suicide watch by correction officers with the corporal's approval.

DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable.

- ◆ Recommendations and decisions from qualified mental health professional are documented and maintained at the jail.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5. Ken Wolfe, jail social worker, or Mobile Crisis and/or the Portage County Health and Human Services Department is notified as required.

DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.6. Removal is completed by the jail social worker, Ken Wolfe or the Portage County Health and Human Services staff following a face-to-face assessment. Documentation is completed and maintained.

DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch.

- ◆ A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized.
- ◆ All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5. Face to face communication daily as well as documented log reports completed on weekends is the typical communication process in the facility.

DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures.

- ◆ Staff demonstrate a working knowledge of first aid and emergency response measures.
- ◆ Staff are familiar with the location and effective use of emergency response equipment.
- ◆ Staff have received training on emergency response, including the use of emergency response equipment within the past evaluation period.
- ◆ The actions taken in response to a suicide in progress or suicide threat are documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5.1. Documentation is completed as required.

DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5.2.

DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following:

- (a) Individual initiating the suicide watch.
- (b) Date and time watch was initiated.
- (c) Reason watch was initiated.
- (d) Name of supervisor contacted.
- (e) Date and time supervisor contacted.
- (f) Name, date, and time of referral to mental health professional.
- (g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time.

◆ Supervisory review of the relevant documentation is completed.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5.3. Documentation is thorough and contains all information required.

DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk factors.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.3. Training was provided in September 2015 and is currently being developed and scheduled for the 2016/2017 training calendar; the 2016 training calendar ends June 2017 per jail administration.

DOC 350.17 (12) Access by staff to debriefing and support services.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.6.1.

DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #748.5.2.

DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a nonpunitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement process.

DOC 350.25 (1) An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following:

- (a) Presents a substantial risk of physical harm to the inmate, another person or property.
- (b) Threatens the security and order of the jail.
- (c) Inhibits a pending disciplinary investigation.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #510.11 and #510.4(b). Administrative confinement rarely occurs. There were no current records to review.

DOC 350.25 (2) A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #510.4.

DOC 350.25 (3) An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #510.7.

DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file.

- ◆ The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #510.11.

RECORDS AND REPORTING

DOC 350.10 Records and reporting.

DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #218.1. Facility records is maintained on paper and electronic files.

DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #218.2.2 and #218.2.3. Records are maintained as required. Paper records are stored in a secured area.

MAINTENANCE OF JAIL, SANITATION, AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(1)(b) The keeper of a lockup facility shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners. The keeper shall serve each prisoner with clean water, towels and food.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37(3)(b) The owner of a lockup facility shall furnish toilet facilities, light and heat for prisoners.

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- ◆ A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- ◆ The jail is constantly clean and in a healthful condition.
- ◆ Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- ◆ All surfaces, equipment, and facilities are clean and in good repair.
- ◆ Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- ◆ Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- ◆ Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- ◆ Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- ◆ Identified maintenance needs are addressed in a timely manner.
- ◆ Hallways are free of clutter and obstructions.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #616, #800 and #804. Jail officers conduct housing unit inspections on a daily basis. The housing units were found in good condition with few areas noted requiring attention.

DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene.

DOC 350.12 (1) Facilities are required to be clean and in good repair.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #804.2. Cleaning of facility vents is encouraged as some are in need of attention.

DOC 350.12 (2) Blankets shall be laundered monthly and before reissue.

DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue.

DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #814.3.1(a)(c)(d). Items are provided as required.

DOC 350.12 (5) Mattresses shall be provided where there is a need for overnight detention. Each mattress and each pillow, if used, shall be covered with a fire retardant, waterproof, easy-to-sanitize material. Mattresses and pillows shall be kept in good repair and in a clean and sanitary condition. The sheriff shall provide adequate bedding. Mattresses shall be cleaned and sanitized before reissue.

DOC 350.12 (6) Suppliers of mattresses and pillows shall be provide evidence to the sheriff that the products are fire retardant, waterproof, and easy to clean.

DOC 350.12 (7) Mattresses shall be of proper size to fit the bed.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #814.3.1(b). Mattresses observed meet the requirements.

DOC 350.12 (8) The sheriff shall provide an inmate whose clothing has been confiscated with adequate and appropriate clothing, including footwear, for use while the inmate is in custody. Footwear shall be cleaned and sanitized before reissue.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #814.3.2. Items are provided to the inmates: typically when placed in the general population of the facility. Footware is cleaned and sanitized as required.

DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #814.3.2. The laundry and stroage area is over flowing with property items, jail supplies, etc. The area is organized but barely able to store all required items. Storage throughout the facility is limited and used to capacity.

DOC 350.12 (10) Vermin and pests are controlled with an effective, documented program. Containers of poisonous compounds used for exterminating rodents or insects shall be prominently and distinctly labeled for easy identification of contents. Poisonous compounds shall be stored independently and separately from food and kitchenware in a locked area not accessible to inmates.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #810.2. A vendor provides pest control services, typically on a monthly basis.

DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #814.6. Items are typically issued during the booking process well within the requirements.

DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #804.3. Inmates are provided cleaning supplies daily, typically in the am hours and supplies are provided prior to meals for table and door trap sanitation.

DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #804.5. Inspections are assigned to various staff, documented when completed including any findings/concerns, reviewed by the jail corporal and forwarded to the jail sergeant and jail captain/jail administrator. The jail captain completes a monthly walkthrough-inspection of the facility as well.

DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #616.6.

DOC 350.12 (15) Property storage containers shall be sanitized before reuse.

- ♦ Property storage containers may include bags, bins, totes and lockers.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #804.3.1. Provided and sanitized as required.

DOC 350.12 (16) Trash is removed daily from all dayrooms.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #804.3. Completed as required.

DOC 350.12 (17) Hazardous waste shall be disposed of according to government regulations.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #802.2. A bio-hazard service is utilized.

INMATE SERVICES

DOC 350.26 Grievance Process. The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #620. Inmate grievances are reviewed and addressed by the jail corporals and the jail sergeant. Any inmate appeals are completed by the jail administrator.

DOC 350.27 Legal Access. The jail shall have policies and procedures to address inmates' access to the courts, their attorneys, and legal materials.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #606.2. Additional legal material may be requested and is provided.

DOC 350.28 Indigence. The jail shall have policies and procedures to address indigence.

DOC 350.28 (1) The jail shall establish definitions and procedures to define indigence.

DOC 350.28 (2) Inmates' access to health care, programming and essential services is not precluded by inability to pay.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #606.3, #1004.2 and #1000.3.

DOC 350.29 Mail. The jail shall have policies and procedures relating to written contact between inmates and their families, friends, attorneys, the court system, government officials and others.

DOC 350.29 (1) Provision for staff inspection and reading of nonprivileged incoming and outgoing mail.

- ◆ Staff demonstrate a working knowledge of the procedures for mail inspection.

DOC 350.29 (2) Provision for the limited inspection of incoming and outgoing privileged mail.

- ◆ Staff demonstrate a working knowledge of the definition of privileged mail and the procedures for inspecting it.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1018.5.

DOC 350.29 (3) Delivery of all nonprivileged and approved privileged incoming mail.

- ◆ Inmate mail is delivered to inmates in a timely manner.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1018.6. Mail is delivered Monday through Friday with the exception of holidays.

DOC 350.29 (4) Inventory and disposition of contraband items found in mail.

- ◆ Contraband items are inventoried and documented.
- ◆ Contraband is promptly turned over to supervisory staff.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1018.6. Contraband that is illegal in nature is turned over to the law enforcement investigative division and documentation is completed.

DOC 350.29 (5) Provision of postage to indigent inmates.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1018.10. A free stamp is provided weekly via the indigent pack inmates may request.

DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld.

- ◆ A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1018.6. Inmates are notified of non-deliverable mail via a form; mail may be placed in the inmate property or returned to the sender.

DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation.

DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted.

DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times.

- ◆ Accommodations are made for visits to occur at times other than scheduled visiting times.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1022.8. A process is in place for requesting visits during nonscheduled times and is reviewed and approved or denied on a case by case basis. Kiosks are scheduled to be placed in the housing units in the near future. Visitation will be via monitors (video visitation). The current visiting booths are scheduled to be used for the public to access a video monitor in place of usage via the internet at a personal off site location (both options are available) and two booths designated for professional visiting (paper-pass to be installed).

DOC 350.30 (3) Documentation of all visits through a visitor log or register.

- ◆ All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1022.3.1. A visitors log is maintained.

DOC 350.30 (4) Establishment of a search policy of visitors and their possessions.

- ◆ Personal contact visitors are subject to a search procedure.
- ◆ Program workers and volunteers are subject to strict guidelines regarding personal items, carry-in equipment, and compliance with jail policies.
- ◆ Law enforcement/Community Corrections/legal visitors are required to adhere to safe correctional practices limiting carry-in items and may be subject to search.
- ◆ Jail staff consistently apply visitation and search standards to all non-jail staff.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1022.4.

DOC 350.30 (5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1022.5. Visiting rules are posted prior to facility entrance, on the facility website and in the inmate rulebook.

DOC 350.30 (6) Establishment of a search policy for inmates before and after each visit.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1022.2. Searching inmates that move throughout the facility is encouraged.

DOC 350.31 Programs and services. The jail shall have policies and procedures relating to the provision of inmate programs and services.

DOC 350.31 (1) Use of community resources, contract providers, and volunteers authorized by the sheriff.

DOC 350.31 (2) Notification to inmates of availability, eligibility, and schedules.

DOC 350.31 (3) Conducting criminal background checks on all volunteers, community resources, and contract providers.

DOC 350.31 (4) Orientation and training on facility operations for all volunteers.

DOC 350.31 (5) Educational programming for inmates who are under 18 years of age consistent with the requirements of the Department of Public Instruction.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1000 and #324. The local Department of Public Instruction is notified as needed. Typically the educator working in the co-located Juvenile Detention Center works with the jail inmates regarding their educational needs.

DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming.

DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility.

DOC 350.32 (2) Notification to inmates of the schedule of religious services available in the jail.

◆ Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1034.14.

DOC 350.32 (3) Identification of religious items that may be kept on an inmate's person or in the cell.

◆ If religious items are permitted, the policies are consistently applied throughout the jail.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1034.10 and #1034.11.

DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #324.2.3.

DOC 350.32 (5) Orientation and training on facility operations for all volunteers.

◆ Documentation of the orientation and volunteer agreement is on file.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #324.2.5.

DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation.

DOC 350.33 (1) Identification of the recreational activities that are available.

DOC 350.33 (2) Schedule of recreational activities.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1010.2. The inmate housing unit dayroom areas allow for daily inmate low-impact exercises.

DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1010.2. Exercise is allowed in the dayroom area of the housing units; there is no other available space for inmate exercise.

DOC 350.34 Publications. The jail shall have policies and procedures relating to access to publications.

DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines.

DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk.

- ◆ Reading material restrictions are posted or otherwise accessible to inmates.

DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials.

- ◆ There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail.
- ◆ All reading materials allowed to be brought in by visitors are subject to search.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1010 and #1018.

DOC 350.35 Canteen. The jail shall have policies and procedures for the establishment and use of canteen, vending or other similar services for inmates.

DOC 350.35 (1) Canteen shall be made available to eligible inmates.

DOC 350.35 (2) Access to canteen may be restricted by the facility based upon inmate classification or status.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff
- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #1014.2 and #1014.2.1. Canteen is provided weekly. Inmate account deposits are managed via a teller machine located in the lobby of the facility.

FOOD SERVICE

DOC 350.11 Food Service. The jail shall have policies and procedures relating to food service.

DOC 350.11 (1) The jail shall provide nutritious and quality food for all inmates.

DOC 350.11 (2) An annual menu review by a qualified nutritionist or dietician shall be completed and maintained in the facility files.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.2. Inmate food service is provided by CBM. A menu review was completed by Abby LeBrun, RD, CD on February 8, 2017.

DOC 350.11 (3) An annual inspection of all full-production and service kitchens in a jail by a qualified, independent outside source documenting that the food service area meets health and safety codes.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #914.4. The annual inspection was completed on July 22, 2016, by the Portage County Health and Human Services Department. The kitchen manager Johanna Tompkins began her duties in the manager capacity in June 2016. She has addressed the one violation cited in the inspection report noted above.

DOC 350.11 (4) Internal monthly inspection of the food service area is completed and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #914.3. Monthly inspections are documented on a form. The weekly cleaning schedule is documented and completed. Monthly additional inspection documentation was difficult to locate; however appears to be completed via weekly cleaning. Manager Tompkins has implemented a procedure, the day following the DOC-ODF inspection, to ensure the monthly inspection is completed and documentation is maintained within the facility files.

DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #914.3. The kitchen area was found in a clean, sanitary and neat condition. The appearance and maintenance of the area is applauded.

DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.9.

DOC 350.11 (7) Food temperatures are properly maintained.

- ◆ Documentation of daily food preparation temperatures is maintained.
- ◆ Documentation of periodic serving temperature readings is maintained.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.5. Temperatures are documented on the meal production log.

DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures.

- ◆ Documentation of daily cooler and freezer temperatures is maintained.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #916.2. Items are stored as required and documented cooler, dry storage and freezer temperatures are maintained.

DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional.

- ◆ Documentation of special diet orders is maintained.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #918.1. Special diet orders (medical, religious or other) are documented and forwarded to the jail kitchen. Menu items provided for the special diet orders are documented on the production log.

DOC 350.11 (10) An inmate may abstain from any foods that violate the inmate's religion. Consistent with available resources, the jail shall provide a substitute from other available foods from the menu served at the meal. The substitutions shall be consistent with sub. (1).

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.7. A special diet request form is utilized for religious meal requests typically reviewed and approved by the jail administration.

DOC 350.11 (11) Inmates assigned to the kitchen who prepare or serve food shall bathe or shower daily and be provided a clean uniform.

DOC 350.11 (12) No person who is known to be infected with any illnesses transmittable by food or utensils may be employed or work as a food handler in a facility.

DOC 350.11 (13) All persons who work in food service areas shall wear clean garments and clean caps or hairnets and shall keep their hands clean at all times when engaged in the handling of food, drink, utensils or equipment. Particular attention shall be given to the cleaning of the fingernails.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #906.3 and #900.8. Inmate workers work in the separate dish-room and only enter the kitchen to place clean dishes in their proper place.

DOC 350.11 (14) Inmate workers are provided orientation and training prior to assignment in the kitchen area.

- ◆ Documentation of orientation and training is maintained.

Compliance:

- ☒ Meets standard
- ☒ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #906.4. There were no inmate worker training records available for review. The kitchen manager was unaware of this requirement; jail security do provide some basic training regarding inmate-worker rules, etc. The kitchen manager will train inmate workers covering additional kitchen/dishroom procedures and maintain a file of the training documents.

DOC 350.11 (15) Inmate workers are supervised throughout all aspects of food preparation and service.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☒ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #906.4. Inmate workers work in the dish-room only and are supervised

DOC 350.11 (16) Food and drink shall be protected from contamination. Meals are covered during transit to and within the facility.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #906.5. Meals are covered during transit.

DOC 350.11 (17) Kitchen food storage and dishwashing equipment temperatures are routinely monitored and documented.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☐ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #914.3.1. Temperature monitoring is completed and documented.

DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean.

Compliance:

- ☒ Meets standard
- ☒ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.5. As a reminder, containers must be covered when not in use.

DOC 350.11 (19) Cleaning agents are stored separately from food service items.

Compliance:

- ☒ Meets standard
- ☐ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☐ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #900.5. A separate closet houses cleaning supplies and is located away from food and equipment.

DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times.

- ◆ Documentation of daily control and inventory is maintained.

Compliance:

- ☒ Meets standard
- ☒ Needs improvement
- ☐ Non-compliant
- ☐ Not reviewed

Verification:

- ☒ Policy and procedure manual review
- ☒ Sample of facility records reviewed
- ☒ Sight confirmation by inspector
- ☐ Verbal confirmation by facility staff

- ☐ Previous compliance documented
- ☐ Other (Specify)

Comments:

Facility policy #210.2. A sharps log list each item that is counted daily and secured [REDACTED]. The cleaning of sharps is completed by kitchen staff. On the day of the inspection, a review of the sharps log found it to be incorrect. The log was updated by the kitchen manager and this office was notified of the corrections the day following the DOC-ODF inspection.